

MAY 10 2010

COMBINED DECLARATION AND POWER OF ATTORNEY		ATTORNEY DOCKET NO.	
		FIRST NAMED INVENTOR David Wells	
<input type="checkbox"/> Declaration Submitted With Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted After Initial Filing (Surcharge Under 37 CFR §1.16(c) Required)		U.S. APPLICATION SERIAL NO. (if known) 10/581,533	CONFIRMATION NO.
		FILING DATE (if known) April 9, 2007	
		GROUP ART UNIT (if known) 3643	
		EXAMINER (if known) Darren W. Ark	

As a below named inventor I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Apparatus for Extermination of Pests

(Title of the invention)

The specification of which:

a. ☐ is attached hereto;

OR

b. ☒ was filed on April 9, 2007
as United States Application Serial No. 10/581,533
or PCT International Application Number _____
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below, by checking the appropriate box, any foreign application for patent or inventor's certificate having a filing date before that of the application on the basis of which priority is claimed:

- a. ☐ no such applications have been filed.
b. ☒ such applications have been filed as follows:

PRIOR FOREIGN APPLICATION(S)					
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, month, year)	PRIORITY CLAIMED	
				YES	NO
New Zealand	529970	12/04/2003	5 APRIL 2007	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under Title 35, United States Code, § 120/365 of any United States and PCT international application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

PRIOR US AND PCT APPLICATIONS		
U.S. APPLICATION NUMBER	DATE OF FILING (day, month, year)	STATUS (patented, pending, abandoned)

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

PROVISIONAL PATENT APPLICATIONS	
U.S. PROVISIONAL APPLICATION NUMBER	DATE OF FILING (Day, Month, Year)

Duty of Disclosure

I acknowledge my duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. § 1.56. Specifically, I am aware of my duty to disclose to the United States Patent and Trademark Office all information known to me that establishes, by itself or in combination with other information, a case of unpatentability of a claim presented in the above-captioned application, or refutes or is inconsistent with a position taken by me or on my behalf in either opposing an argument of unpatentability or asserting an argument of patentability.

Power of Attorney and Correspondence Address Indication

I hereby appoint the following attorney:

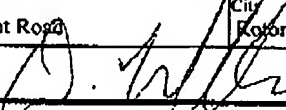
Raymond Van Dyke
 Washington Square
 1050 Connecticut Avenue, NW
 P.O. Box 65302
 Washington, DC 65302

to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith. Please direct all correspondence to the above address.

I hereby authorize them to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization who/which first sends/sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct my attorney to the contrary.

I understand that the execution of this document, and the grant of a power of attorney, does not in itself establish an attorney-client relationship between the undersigned and the above attorney.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

2	Full Name of Inventor	Family Name WELLS	First Given Name David	Second Given Name
0	Residence & Citizenship	City Rotorua	State or Foreign Country NZ	Country of Citizenship NZ
1	Mailing Address	Address 213 Kawaha Point Road	City Rotorua	State/Country NZ
Signature of Inventor 				Date 13 APRIL 2010

☐ Additional Inventors are being named on the supplemental sheet attached hereto.

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COMBINED DECLARATION AND POWER OF ATTORNEY		ATTORNEY DOCKET NO.	
		FIRST NAMED INVENTOR Luc Desbonnets	
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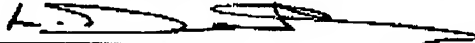
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to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith. Please direct all correspondence to the above address.

I hereby authorize them to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization who/which first sends/sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct my attorney to the contrary.

I understand that the execution of this document, and the grant of a power of attorney, does not in itself establish an attorney-client relationship between the undersigned and the above attorney.

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2	Full Name of Inventor	Family Name DESBONNETS	First Given Name LUC	Second Given Name
0	Residence & Citizenship	City Auckland	State or Foreign Country NZ	Country of Citizenship NZ
1	Mailing Address	Address 1 Margaret Reeves Lane, Waihake Island	City Auckland	State/Country NZ
Signature of Inventor 			Date 13 APRIL 2010	

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